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AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS 2011-2914 TYPE: [x] IXC [] CLEC [] ILEC [] Wireless 2.2017 /

		CERTIFICATED CO	MPANY INFORMATION	
	ATN, Inc			
Comp	any Name		FEnal.	
				912-882-2000
Dba/fl	ка		Telephone	
	91	3 Dilworth St	·	
Mailir	ng Address	o o morar ot		
	·	GA 31558		
City S	State, Zip Code	GA 31000		
Oity, C	•	2 Dilworth Ct		
Pucin	ess Location	3 Dilworth St.		
DUSIN				
<u>~~~</u>		. Marys, GA 31558		
City, S	State, Zip Code		County	
		REGISTERED AC	SENT INFORMATION	
Pogie	tored Agent:	National Registered Age	ente Inc	
Regis	tereu Agent.	National Registered Agr	ents, inc.	·
Mailin	a Address:	2 Office Park Court Suit	te 103	
WIGHT	g /\ddrcss	Z Office Faire Court out	<u> </u>	- · · · · · · · · · · · · · · · · · · ·
City. S	State, Zip Code:	Columbia, SC 29223		
Α.	Steve B. Rawls_ General Manager (Inc 912-673-6005	nission's rules and regulations clude address if different than above	e.) srawls@atni.net	
	Telephone Number	· Facsimile Number	E-mail Address	
B.	Lisa Hunter	Complaints Representative (Inclu	ude address if different than abo	ove)
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	Telephone Number	Facsimile Number	E-mail Address	
C1.	Lisa Hunter	Complaints Representative for Es	calated Complaints (Includ	de address if different than above.)
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	Telephone Number	Facsimile Number	E-mail Address	
C2.	1-866-882-2722	oll Free Number)	,	7700
D	·	,	•	RECE
D.	Steve B. Rawls Engineering Operatio	ns (Include address if different that	n above.)	RECE
	912-673-6005	/ 912-673-6004 /	srawls@atni.net	TEB 1 x in
	Telephone Number	Facsimile Number	L-IIIdii Addi Coo	
E.	Steve B. Rawls		(OLERKS OF
L. .		lude address if different than above	.)	" OFFICE
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				/ lisa@atni.not			
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	reiephone Number	i acsimile ivumber		E-mail Address			
itic	on, please provide the fol	lowing company contact info	ormation	to assist in proper routing of correspor	dence and in		
Darlene Thrift							
	,		above.)				
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	912-576-7220 Tolophone Number	/ 912-673-6004 Facsimile Number		darlene@atni.net E-mail Address			
	Telephone Number	racsimile Number		E-IIIali Address			
	Dorlana Thrift			10942 J d			
	Darlene Thrift This form was completed by (print name)			Signature	*		
	This form was completed by (print hanne)			- I. I			
	Secretary/Regulatory Clerk			2- 14/11			
	Title			Date			
	RETURN COMPLETED F	ORM TO:					
	Public Service	e Commission of SC		Office of Regulatory Staff			

Post Office Drawer 11649 Columbia, South Carolina 29211 1401 Main Street, Suite 900 Columbia, South Carolina 29201

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